

Attorney/Docket No.36689.26  
Customer No. 000027683

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

*In re* Application of: Philip J. Scarpase and Gang Li  
§ Confirmation Number: 5010  
Appl. No. 10/822,613  
§  
Filed: April 12, 2004  
§ Examiner: Salvoza, M Franco G  
For: rAAV VECTOR-BASED PRO-  
§ Group Art Unit: 1648  
OPIOMELANOCORTIN COMPOSITIONS AND  
METHODS OF USE  
§  
§ Attorney Docket No.: 36689.26  
§

**TRANSMITTAL**

Mail Stop Amendment  
Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed for filing are the following:

1. Amendment and Response to Office Action dated November 21, 2005;
2. Fee Transmittal; and
3. Return self-addressed stamped postcard.

Please date stamp and return the postcard as evidence of receipt of this transmittal.

The Commissioner is hereby authorized to charge any fee deficiencies or credit any over payment for the filing of these documents to the Deposit Account of Haynes and Boone, LLP 08-1394. **This form submitted in duplicate.**

Respectfully submitted,

Mark D. Moore, Ph.D.  
Registration No. 42,903

Date: February 21, 2006  
HAYNES AND BOONE, LLP  
901 Main Street, Suite 3100  
Dallas, Texas 75202-3789  
Telephone: 713-547-2040  
Facsimile: 214-200-0853  
H-596359\_1.DOC

Certificate of Mailing 37 C. F. R. § 1.8	
I hereby certify that this correspondence is being deposited with the U. S. Postal Service with sufficient postage as First Class Mail on the date indicated below and is addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
February 21, 2006 Date	Mark D. Moore Name of person mailing paper and fee
Signature of person mailing paper and fee 	



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Effective on 12/08/2004.  
See pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)

Complete if Known	
Application Number	10/822,613
Filing Date	April 12, 2004
First Named Inventor	Philip J. Scarpace
Examiner Name	Salvoza, M Franco G
Art Unit	1648
Attorney Docket No.	36689.26

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 08-1394 Deposit Account Name: Haynes and Boone, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		<b>Fees Paid (\$)</b>
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

<b>Fee (\$)</b>	<b>Small Entity</b>
50	25
200	100
360	180

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
- 20 or HP =	x 50	=		<b>Fee (\$)</b> <b>Fee Paid (\$)</b>
HP = highest number of total claims paid for, if greater than 20				

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 3 or HP =	x 200	=	

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other:

**SUBMITTED BY**

Signature		Registration No 42,903 (Attorney/Agent)	Telephone 713-547-2040
Name (Print/Type)	Mark D. Moore, Ph.D.		Date February 21, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Customer Number 00027683  
Serial Number: 10/822,613

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*In re* Application of:

Philip J. Scarpase and  
Gang Li

Serial No. 10/822,613

Filed: April 12, 2004

For: rAAV VECTOR-BASED PRO-  
OPIOMELANOCORTIN COMPOSITIONS  
AND METHODS OF USE

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**Confirmation No.: 5010**

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Examiner: Salvoza, M. Franco G.

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Group Art Unit: 1648

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Atty. Docket No.: 36689.26

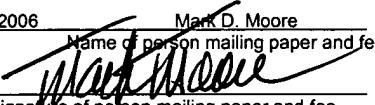
(formerly 4300.015400)

§

**1. AMENDMENT; 2. RESPONSE TO OFFICE ACTION DATED NOVEMBER 21, 2005**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Certificate of Mailing 37 C. F. R. § 1.8	
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February 21, 2006	Mark D. Moore
Date	Name of person mailing paper and fee
	
Signature of person mailing paper and fee	

The Examiner is respectfully requested to enter the following amendment. A response to the Official Action in the present application, dated November 21, 2005 ("the Action"), is also submitted, and the Examiner is requested to consider the remarks therein. Applicants believe that the present materials place the claims in condition for allowance, and re-examination and reconsideration is respectfully requested on this basis.

Should any fees be deemed necessary for any reason in connection with the present submission, the Commissioner is hereby authorized to deduct any necessary amounts from Deposit Account No. 08-1394, Order No. 36689.26.